



Permit # \_\_\_\_\_

**City of Carmel/Clay Township****APPLICATION FOR ELECTRICAL INSPECTION**

<b>CONTRACTOR INFORMATION:</b>	NAME _____ PHONE _____ FAX _____
	Street Address _____ City _____ State _____ Zip _____
<b>APPLICANT INFORMATION:</b>	NAME _____ CONTACT PHONE: _____
	Property Owner (or agent) _____ OR Contractor Representative _____
<b>TYPE of WORK:</b>	RESIDENTIAL: _____ COMMERCIAL: _____
<b>PROPERTY OWNER INFORMATION:</b>	PROPERTY OWNER NAME(S): _____ PHONE: _____
	STREET ADDRESS: _____ City _____ State _____ Zip _____
<b>INSPECTION INFORMATION:</b>	STREET ADDRESS (INSPECTION LOCATION): _____ City _____ State _____ Zip _____
	DATE OF INSPECTION: _____ TIME OF INSPECTION: _____

**TYPE OF IMPROVEMENT:**

- ☐ UPGRADE SERVICE: From \_\_\_\_\_ to \_\_\_\_\_
- ☐ UPGRADE PANEL BOARD(S)
- ☐ ADDITION, ALTERATION, REMODEL, or REPAIR TO AN EXISTING ELECTRICAL DISTRIBUTION SYSTEM
- ☐ NEW METER SERVICE (i.e. Fountain in pond; Subdivision street or signage lighting; Installation of new utility services for an area)
- ☐ ROW SIGNAL, SENSOR, MONITOR (i.e. Traffic Light)
- ☐ CONNECTION or RECONNECTION TO A RELOCATED STRUCTURE

**MOVING SERVICE FROM OVERHEAD TO UNDERGROUND?**☐ YES ☐ NO**Number of NEW CIRCUITS:** \_\_\_\_\_**Number of METERS:** \_\_\_\_\_

I CERTIFY THAT THE INFORMATION CONTAINED ON THIS FORM IS COMPLETE AND ACCURATE.

\_\_\_\_\_  
Signature\_\_\_\_\_  
PRINT\_\_\_\_\_  
DATE**COMMENTS or FURTHER LOCATION CLARIFICATION: (Please attach map of inspection location)**

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**FEES: \$ 112.00 for Commercial Inspections; \$ 61.50 for Residential Inspections**